

3

Combined Declaration For Patent Application and Power of Attorney

Practitioner's Docket No. **IN-5398**

As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **COMPUTER-IMPLEMENTED VEHICLE REPAIR ANALYSIS SYSTEM**

The specification of which (check only one item below):

<input type="checkbox"/>	is attached hereto
<input checked="" type="checkbox"/>	Was filed as United States Application Serial No. <u>09/602,922</u> on and <u>June 23, 2000</u> Was amended on _____ (if applicable).
<input type="checkbox"/>	was filed as PCT international application Number _____ on _____ and was amended under PCT Article 19 on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application is accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code § 119 of any foreign application(s) for patent or inventor's certificate of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	A PPLICATION NUMBER	DATE OF FILING DATE/MONTH/YEAR	PRIORITY CLAIMED UNDER 35 UNDER 35 USCX § 119
			YES NO
			YES NO
			YES NO
			YES NO

I hereby claim the benefit under Title 35, United States Code, Sec. § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, Sec. § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Sec. § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATION DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC § 120:


U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATION DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			

Combined Declaration For Patent Application and Power of Attorney (Continued)				Practitioner's Docket No. IN-5398	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (List name and registration number).					
Anne Gerry Sabourin	Registration No.	33,772	Anna M. Budde	Registration No.	35,085
Mary E. Golota	Registration No.	36,814	Michael P. Brennan	Registration No.	30,612
Fernando A. Borrego	Registration No.	34,780	Brian Stegman	Registration No.	30,977
Karen M. Dellerman	Registration No.	33,592			
Send Correspondence to:		Direct Telephone Calls to:		Direct Telephone Calls to:	
BASF CORPORATION PATENT DEPARTMENT 26701 TELEGRAPH ROAD SOUTHFIELD, MI 48034-2442		(name and telephone number) <u>Anne Gerry Sabourin</u> (248) 948-2021 Fax (248) 948-2093		or (name and telephone number) <u>Mary E. Golota</u> (248) 948-2020 Fax (248) 948-2093	

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)




FULL NAME OF INVENTOR	FAMILY NAME Bargnes	FIRST GIVEN NAME Guy	SECOND GIVEN NAME O.
RESIDENCE & CITIZENSHIP	CITY Grosse Pointe	STATE OR FOREIGN COUNTRY Michigan	COUNTRY OF CITIZENSHIP United States of America
POST OFFICE ADDRESS	POST OFFICE ADDRESS 640 Rivard Boulevard	CITY Grosse Pointe	STATE & ZIP CODE/COUNTRY Michigan 48230 US
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  SIGNATURE OF INVENTOR 201 </div> <div style="text-align: center;"> Guy O. Bargnes TYPED NAME </div> <div style="text-align: center;"> 7/9/10/00 DATE </div> </div>			

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Karen M. Dellerman	Registration No. 33,592		
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		or (name and telephone number) <u>Mary E. Golota</u> (248) 948-2020 Fax (248) 948-2093	

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SIGNATURE(S)


FULL NAME OF INVENTOR	FAMILY NAME HOWE	FIRST GIVEN NAME John	SECOND GIVEN NAME K.
RESIDENCE & CITIZENSHIP	CITY Palm Harbor	STATE OR FOREIGN COUNTRY Florida	COUNTRY OF CITIZENSHIP United States of America
POST OFFICE ADDRESS	POST OFFICE ADDRESS 3473 Tanglewood Trail	CITY Palm Harbor	STATE & ZIP CODE/COUNTRY Florida 34685 US
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">   SIGNATURE OF INVENTOR 202 </div> <div style="text-align: center;"> John K. HOWE TYPED NAME </div> <div style="text-align: center;">  9-20-00 DATE </div> </div>			

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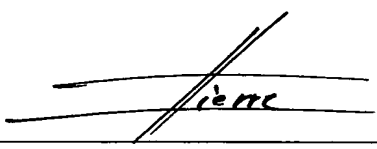
FULL NAME OF INVENTOR	FAMILY NAME KELLY	FIRST GIVEN NAME Charles	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Grosse Pointe Farms	STATE OR FOREIGN COUNTRY Michigan	COUNTRY OF CITIZENSHIP United States of America
POST OFFICE ADDRESS	POST OFFICE ADDRESS 312 Reno Lane	CITY Grosse Pointe Farms	STATE & ZIP CODE/COUNTRY Michigan 48236 US
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  _____ SIGNATURE OF INVENTOR 203 </div> <div style="text-align: center;"> Charles KELLY _____ TYPED NAME </div> <div style="text-align: center;"> 18 September 2000 _____ DATE </div> </div>			

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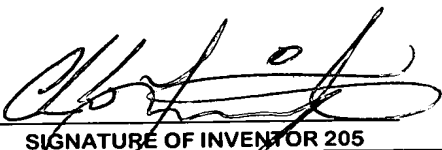
FULL NAME OF INVENTOR	FAMILY NAME PIERRE	FIRST GIVEN NAME Jean-Claude	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY D-48308 Senden	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP French
POST OFFICE ADDRESS	POST OFFICE ADDRESS Schloßfeld 184	CITY D-48308 Senden	STATE & ZIP CODE/COUNTRY Federal Republic of Germany
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  — SIGNATURE OF INVENTOR 204 </div> <div style="text-align: center;"> Jean-Claude PIERRE <u>JEAN-CLAUDE PIERRE</u> — TYPED NAME </div> <div style="text-align: center;"> <u>29 August 2000</u> — DATE </div> </div>			

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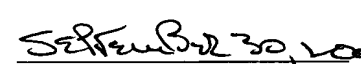
FULL NAME OF INVENTOR	FAMILY NAME LAVINGTON	FIRST GIVEN NAME Chris	SECOND GIVEN NAME W.
RESIDENCE & CITIZENSHIP	CITY Roseburg	STATE OR FOREIGN COUNTRY Oregon	COUNTRY OF CITIZENSHIP United States of America
POST OFFICE ADDRESS	POST OFFICE ADDRESS 360 Tanglewood Lane	CITY Roseburg	STATE & ZIP CODE/COUNTRY 97470 Oregon US
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;">  SIGNATURE OF INVENTOR 205 </div> <div style="text-align: center;"> Chris W. LAVINGTON TYPED NAME </div> <div style="text-align: center;"> 9/26/00 DATE </div> </div>			

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FULL NAME OF INVENTOR	FAMILY NAME TORRES	FIRST GIVEN NAME Antonio	SECOND GIVEN NAME C.
RESIDENCE & CITIZENSHIP	CITY Millersville	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP United States of America
POST OFFICE ADDRESS	POST OFFICE ADDRESS 213 Finnegan Drive	CITY Millersville	STATE & ZIP CODE/COUNTRY 21108 Maryland US
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  SIGNATURE OF INVENTOR 206 </div> <div style="text-align: center;"> Antonio C. TORRES TYPED NAME </div> <div style="text-align: center;">  DATE </div> </div>			



PATENT

(Practitioner's Docket No. IN-5398)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

BARGNES et al.

US Serial No. 09/602,922

Filed: June 23, 2000

Group Art Unit: Not Assigned

Examiner: Not Assigned

For: COMPUTER-IMPLEMENTED VEHICLE REPAIR ANALYSIS SYSTEM

Patent*: Issue Date

Reexamination No.: Issue Date

Reissue: Issue Date

*NOTE: Insert name(s) of inventor(s) and title for patent.

Assistant Commissioner for Patents
Washington, D.C. 20.231

STATEMENT UNDER 37 C.F.R. § 3.73(b)-
ESTABLISHING RIGHT OF ASSIGNEE TO TAKE ACTION

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10*
(When using Express Mail, the Express Mail label number is mandatory;
Express Mail certification optional.)

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

☒ deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

37 C.F.R. § 1.8(a)

37 C.F.R. § 1.10*

☒ with sufficient postage as first class mail.

☐ as "Express Mail Post Office to Addressee"
Mailing Label No: EK (mandatory)

TRANSMISSION

☐ transmitted by facsimile to the Patent and Trademark Office.

Date: October 18, 2000

Signature

Marjorie Ellis

(type or print name of person certifying)

1. The assignee(s) of the entire right, title and interest hereby seek(s) to take action in the PTO in this matter.

IDENTIFICATION OF ASSIGNEE

BASF CORPORATION

2.

Name of assignee

CORPORATION

Type of assignee, e.g., corporation, partnership, university, government agency, etc.

PERSON(s) AUTHORIZED TO SIGN

Anne Gerry Sabourin, 33,772

or

Mary E. Golota, 36,814

(type name of person authorized to sign on behalf of assignee)

Senior Counsel

Senior Attorney

Title of person authorized to sign

(complete the following, if applicable)

☒ I, WE, the person signing below, state that I am empowered to sign this statement on behalf of the assignee.

BASIS OF ASSIGNEE'S INTEREST

Ownership by the assignee is established as follows:

A.

1. ☐ An assignment from the inventor(s) of the matter identified above, which was recorded in the PTO at

Reel _____,

Frame ____.

2. ☒ An assignment (document) separately being submitted for recordal herewith.

AND/OR

B.

1. ☐ A chain of title from the inventor(s) to the current assignee as shown below:

1. From: _____

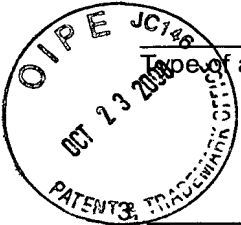
Name of inventor(s)

To: _____

Recorded in PTO:

Reel _____ Frame _____

(Statement under 37 C.F.R. § 3.73(b) - Establishing Right of Assignee to Take Action [16-16]--page 2)





(check item below, and add details, if applicable)

☐ Additional documents in the chain of title are listed in the attached Supplemental Sheet.

COPIES OF DOCUMENTS IN CHAIN OF TITLE

(complete this item, if copies are being sent)

☐ Copies of the assignment(s) or other document(s) in the chain of title are attached as follows:

☐ A

☐ 1

☐ 2

☐ B

☐ 1.

☐ 2

☐ 3.

Reg. No.: 33,772

Anne H. Sabourin
SIGNATURE OF ATTORNEY

Anne Gerry Sabourin
Type or print name of attorney

Tel. No.: (248) 948-2021

BASF Corporation
26701 Telegraph Road
P.O. Address
Southfield, Michigan 48034-2442

(Statement under 37 C.F.R. § 3.73(b) - Establishing Right of Assignee to Take Action [16-161-page 3])